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24126 7590 06/13/2006

ST. ONGE STEWARD JOHNSTON & REENS, LLC
986 BEDFORD STREET
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Daniella Crimi	(Depositor's name)
<i>Daniella Crimi</i>	(Signature)
September 5, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/689,964	10/21/2003	Jelenc Jozse	03852-P0003A	4469

TITLE OF INVENTION: DEVICE WITH VACUUM BAG FOR PRESSURE THERAPY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	09/13/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
DEMILLE, DANTON D	3764	601-01100089/05/2006 TBESHAW2 00000111 10689964
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.163).		
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		
2. For printing on the patent front page, list:		
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,		
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.		
(A) NAME OF ASSIGNEE		
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St. Onge Steward Johnston & Reens LLC		
1. _____		
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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
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4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-4516 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

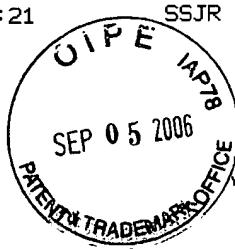
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature *Wesley W. Whitmyer, Jr.*Date *5 Sept 2006*Typed or printed name *Wesley W. Whitmyer, Jr.*Registration No. *33,558*

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September 5, 2006

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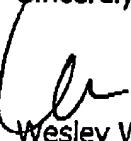
From: Daniella Crimi for
Wesley W. Whitmyer, Jr.

Re: Serial No. 10/689,964
Device with Vacuum Bag for Pressure Therapy

Dear Sir or Madam:

Attached is the Issue Fee Transmittal, Part B – Fee(s) Transmittal, and Form PTO-2038 (credit card payment).

Sincerely,


Wesley W. Whitmyer, Jr.
wwhitmyer@ssjr.com

WWW:dc
Enclosures